

Work Order ID 116148

April-07-14 8:53:52 AM

\*116148\*

Page 1

Item ID: 647.0410

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Tube

Start Date: 4/07/14 Start Qty: 5.00 \*5\*

Cust Item ID:

Required Date: 4/11/14 Req'd Qty: 5.00 \*5\*

Customer:

Reference:

Approvals: Process Plan: ✓ Date: \_\_\_\_\_

Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/  
Work Center ID      Operation  
Description

Set Up/  
Run Hours      Tool ID      Tool #      Plan  
Code      Accept  
Qty      Reject  
Qty      Reject  
Number      Insp.  
Stamp

Draw Nbr      Revision Nbr

647.0400      N/C

110

0.00

\*110\*

Small Fab

Memo

0.00

Small Fab

1- CUT AS PER DWG  
2- DEBURR AS PER DWG

120

QC6- Inspect dimensions to drawing

0.00

\*120\*

QC

Memo

0.00

Quality Control

5 \_\_\_\_\_ FF 14-04-07

SNP  
14/4/14

S \_\_\_\_\_



**Work Order ID 116148**

April-07-14 8:53:52 AM

**\*116148\***

Page 2

Item ID: 647.0410

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Tube

Start Date: 4/07/14 Start Qty: 5.00 **\*5\***

Cust Item ID:

Required Date: 4/11/14 Req'd Qty: 5.00 **\*5\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_

Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

Outsource process-Anodize per QSI017 4.1.10.1

0.00

**\*130\***

Outsource4

Memo

0.00

Outsource process - Anodize

Issue P/O to ATG : 23697

1- Black Anodize as per Dwg 647.0400

2- PRIME AS PER DWG, SEE NOTE #2

Certification of Comformity is required

CX 14/04/08 S

140

Receive &amp; Inspect for Damage &amp; Mat'l Certs

0.00

**\*140\***

Packaging

Memo

0.00

Packaging

P 14/4/16 (5)

150

QC5- Inspect part completeness to step on W/O

0.00

**\*150\***

QC

Memo

0.00

Quality Control

DAS

27  
9-89

14/4/16

S



# Work Order ID 116148

April-07-14 8:53:52 AM

**\*116148\***

Page 3

Item ID: 647.0410

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Tube

Start Date: 4/07/14 Start Qty: 5.00 **\*5\***

Cust Item ID:

Required Date: 4/11/14 Req'd Qty: 5.00 **\*5\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_

Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

180

Identify as per dwg & Stock Location: ST536

0.00

**\*180\***

Packaging

Memo

0.00

Packaging

\*\*\*IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV\*\*\*

5X

DAS  
28  
9-89

APR 16 2014

190

QC21- Final Inspection - Work Order Release

0.00

**\*190\***

QC

Memo

0.00

Quality Control

14-4-17  
14-04-16

# Picklist Print

April-07-14 8:53:51 AM

Page 1

Work Order ID: 116148

**\*116148\***

Parent Item: 647.0410

**\*647 0410\***

Parent Item Name: Tube

Start Date: 4/07/14

Required Date: 4/11/14

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A 12.09.18 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M6061T6T1.000W.035

Purchased

No

110

f

22.0000

0.4275

3

**\*M6061T6T1 000W 035\***

6061-T6 ROUND TUBE 1" X .035" WALL

**\*\***

*FF 14-04-07*

Location

Loc Qty

Loc Code

MAT016

22

124694

22

3

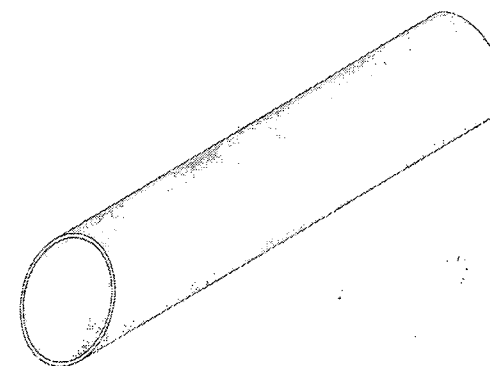


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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED
1	LAST PROTOTYPE REVISED PER		N/C
2	WITH RELEASE	04/28/09	P. SPANVO

# NOTES:

- 1 MATERIAL: 6061-T6 ALUMINUM IAW AMS-4080
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK  
CARDINAL 4860-50 PRETREATMENT PRIMER  
PRIME IAW MIL-P-23377J TYPE I CLASS N
3. DEBURR AND BREAK ALL SHARP EDGES
4. IDENTIFY IAW MPP-120



647.0410

Ø 1.000

Ø .94

30.0°

5.13

W/O 160548

		647.0410	TUBE		
	FIND #	PART #	DESCRIPTION	MAT'L	SPEC
QTY	PARTS LIST				
NEXT ASSY (S)	ORIGINAL DATE		<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760)724-5300		
646.9500	DRAWN BY				
	CHECKED BY				
	DATE				
	DRAWING APPROVAL				
	BY: 2608				
	DATE: 04/28/09				
	CITY: CT				
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.5°			TUBE SIZE CAGE CODES B 07026 647.0400 SCALE NONE SHEET 1 OF 1		



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO23697**

Purchase Order Date 4/8/2014

PO Print Date 4/16/2014

Page Number 1 of 2

**Order From :**

VC-ATG001

**Ship To :** DART AEROSPACE LTD

A.T.G. INDUSTRIES INC.  
731 INDUSTRIELLE ROAD  
ROCKLAND, ON K4K 1T2  
CANADA

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

*REVISED*

**Contact Name**

**Vendor Phone** 613-446-4544

**Ship To Contact**

**Ship To Phone**

**Ship Via:** VENDOR'S TRUCK

**Ship Acct:**

**Buyer**

Chantal Lavoie

**Customer POID**

**Customer Tax #**

10127-2607

**Terms**

Net 30

**Currency**

CAD

**FOB**

FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	115082	647.1611 WIPER DEFLECTOR	4/23/2014 Yes 4/23/2014		5.00	\$10.70	\$53.50
FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N							
Line Total:							\$53.50
2	113268	646.9710 BODY	4/23/2014 Yes 4/23/2014		5.00	\$14.50	\$72.50
FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N							
Line Total:							\$72.50
3	116148	647.0410 TUBE	4/23/2014 Yes 4/23/2014		5.00	\$8.65	\$43.25
FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N							

Note:

4/16/2014



A.T.G. Industries Inc.  
731, rue Industrielle Rd.  
PLATING DEPARTMENT  
Rockland, On K4K 1T2  
Canada  
Ph: (613) 446-4544  
Fax: (613) 446-4556

### Pack List

Number: 62987

Date: 16-Apr-14

To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ship To


DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST Rev:  5 PCS 647.1611 (10.70) 5 PCS 646.9710 (14.50) 5 PCS 647.0410 (8.65)  HARS ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2  PRIME MIL-P-23377J TYPE I CLASS N  PRICE IS PER PIECE Job: 20140220 PO: 23697 Line:		
<p align="center">Certificate of Conformance</p> <p>A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.</p> <p align="center">ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY</p> <p>DATE : <u>16/4/14</u></p> <p>CERTIFIED SIGNATURE : <u></u></p> <p>RECEIVER SIGNATURE : _____</p>			